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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of

Applicant : T. A. Aber, et al.
Serial No. : 09/815,313
Filed : 22 Mar 2001

Examiner : James A. Kramer
Art Unit : 3627

Entitled : System and method for Invoice
Imaging Through Negative
Confirmation Process
Docket No. : END920000175US1

Commissioner For Patents
P. O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR 1.8

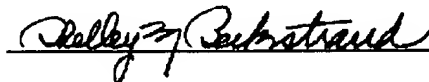
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correspondence comprising 2 pages:

CERTIFICATE OF FACSIMILE TRANSMISSION	1 page
REQUEST FOR CONTINUED EXAMINATION (RCE)	
TRANSMITTAL	1 page

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SHELLEY M BECKSTRAND

Date: 27 Feb 2006



REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Address to:
Commissioner for Patents
Mail Stop RCE
P. O. Box 1450
Alexandria, VA 22313-1450

Application Number 089/815,313
Filing Date 22 March 2001
First Named Inventor T. A. Aber
Art Unit 3627
Examiner Name J. A. Kramer
Attorney Docket No. END920000175US1

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

1. SUBMISSION REQUIRED UNDER 37 CFR §1.114

a. ☒ Previously submitted

i. ☒ Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on 30 Jan 2006.

(Any unentered amendment(s) referred to above will be entered.)

ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on *****.

iii. ☐ Other

b. ☐ Enclosed

i. ☐ Amendment/Reply

ii. ☐ Information Disclosure Statement (IDS)

iii. ☐ Affidavit(s)/Declaration(s)

iv. ☐ Other

2. MISCELLANEOUS

a. ☐ Suspension of action on the above-identified application is requested under 37 CFR §1/103(c) for a period of ** months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR §1.17(i) required).

b. ☐ Other

3. FEES

a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to IBM Corporation Deposit Account No. 09-0457

i. ☒ RCE fee required under 37 CFR §1.17(e)

ii. ☐ Extension of time fee (37 CFR §§1.136 and 1.17)

iii. ☐ Other

b. ☐ Check in the amount of \$ enclosed

c. ☐ Payment by credit card (Form PTO-2038 enclosed)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Signature
Name

Shelley M Beckstrand
SHELLEY M BECKSTRAND

Date

27 Feb 2006

Registration No. 24,886

CERTIFICATE OF MAILING OR TRANSMISSION

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Signature
Name

Shelley M Beckstrand
SHELLEY M BECKSTRAND

Date

27 Feb 2006